



Please type a plus sign (+) inside 

PTO/SB/05 (12/97)
Approved for  through 09/30/00. OMB 0651-0032

Patent and Trademark Office:  DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number


UTILITY PATENT APPLICATION TRANSMITTAL (Only for new nonprovisional applications under 37 CFR 1.53(b))	Attorney Docket No.	16321-709	Total Pages	85
	First Named Inventor or Application Identifier			
	Mohamed S. Danish; Title: <i>Method And System For Executing A Guided Parametric Search</i>			
Express Mail Label No.		EL32459383 IUS		

APPLICATION ELEMENTS See MPEP chapter 600 concerning utility patent application contents.	ADDRESS TO: Assistant Commissioner for Patents Box Patent Application Washington, DC 20231
<p>1. <input checked="" type="checkbox"/> Fee Transmittal Form (Submit an original, and a duplicate for fee processing)</p> <p>2. <input checked="" type="checkbox"/> Specification [Total Pages <u>46</u>] (preferred arrangement set forth below)</p> <ul style="list-style-type: none">- Descriptive title of the Invention- Cross References to Related Applications- Statement Regarding Fed sponsored R&D- Reference to Microfiche Appendix- Background of the Invention- Brief Summary of the Invention- Brief Description of the Drawings- Detailed Description- Claim(s)- Abstract of the Disclosure <p>3. <input checked="" type="checkbox"/> Drawing(s) (37 CFR 1.152) [Total Sheets <u>30</u>]</p> <p>4. <input checked="" type="checkbox"/> Oath or Declaration [Total Pages <u>3</u>]</p> <ul style="list-style-type: none">a. <input type="checkbox"/> Newly executed (original or copy)b. <input checked="" type="checkbox"/> Copy from a prior application (37 CFR 1.63(d)) (for continuation/divisional with Box 17 completed) [Note Box 5 below]i. <input type="checkbox"/> DELETION OF INVENTOR(S) Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b). <p>5. <input checked="" type="checkbox"/> Incorporation By Reference (useable if Box 4b is checked) The entire disclosure of the prior application, from which a copy of the oath or declaration is supplied under Box 4b, is considered as being part of the disclosure of the accompanying application and is hereby incorporated by reference therein.</p> <p>6. <input type="checkbox"/> Microfiche Computer Program (Appendix)</p> <p>7. Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary)</p> <ul style="list-style-type: none">a. <input type="checkbox"/> Computer Readable Copyb. <input type="checkbox"/> Paper Copy (identical to computer copy)c. <input type="checkbox"/> Statement verifying identify of above copies <p>8. <input type="checkbox"/> Assignment Papers (cover sheet & documents(s))</p> <p>9. <input checked="" type="checkbox"/> 37 CFR 3.73(b) Statement (when there is an assignee) <input type="checkbox"/> Power of Attorney</p> <p>10. <input type="checkbox"/> English Translation Document (if applicable)</p> <p>11. <input type="checkbox"/> Information Disclosure Statement (IDS) PTO-1449 <input type="checkbox"/> Copies of IDS Citations</p> <p>12. <input checked="" type="checkbox"/> Preliminary Amendment (4 pages)</p> <p>13. <input checked="" type="checkbox"/> Return Receipt Postcard (MPEP 503) (Should be specifically itemized)</p> <p>14. <input type="checkbox"/> Small Entity Statement filed in prior application, <input type="checkbox"/> Status still proper and desired</p> <p>15. <input type="checkbox"/> Certified Copy of Priority Document(s) (if foreign priority is claimed)</p> <p>16. <input type="checkbox"/> Other:</p>	

17. If a **CONTINUING APPLICATION**, check appropriate box and supply the requisite information:

☒ Continuation ☐ Divisional ☐ Continuation-in-part (CIP) of prior application No. 08/943,573
which is a

☒ Continuation ☐ Divisional ☐ Continuation-in-part (CIP) of prior Patent No. 5,715,444

16. CORRESPONDING ADDRESS					
<input type="checkbox"/> Customer Number of Bar Code Label		 (Insert Customer No. or Attach bar code label here) 21971		or <input checked="" type="checkbox"/> Correspondence address below	
NAME	Kent R. Richardson				
	Registration No.: 39,443				
ADDRESS	WILSON SONSINI GOODRICH & ROSATI				
	650 Page Mill Road				
CITY	Palo Alto	STATE	California	ZIP CODE	94304-1050
COUNTRY	USA	TELEPHONE	(650) 493-9300	FAX	(650) 845-5000

SUBMITTED BY

Typed or

Printed Name Kent R. Richardson

Signature 

Reg. Number 39,443

Date 8/26/99

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

FEE TRANSMITTALNote: Effective December 8, 1998
Patent fees are subject to annual revision.**Complete if Known**

Application Number	Not Yet Assigned
Filing Date	Herewith (26 August 1999)
First Named Inventor	Mohamed S. Danish
Group Art Unit	Not Yet Assigned
Examiner Name	Not Yet Assigned
Attorney Docket Number	16321-709

TOTAL AMOUNT OF PAYMENT (\$)
760.00**METHOD OF PAYMENT (check one)**

- 1.
- ☒
- The Commissioner is hereby authorized to charge indicated fees and credit any over payments to:

Deposit Account Number: 23-2415 (16321-709)
Deposit Account Name: Wilson Sonsini Goodrich & Rosati

- ☒
- Charge Any Additional Fee Required Under 37 CFR 1.16 and 1.17
- ☐
- Charge the Issue Fee Set in 37 CFR 1.18 at the Mailing of the Notice of Allowance

- 2.
- ☒
- Payment Enclosed:
-
- ☐
- Check
- ☐
- Money Order
- ☒
- Other

FEE CALCULATION**1. FILING FEE**

Large Entity Fee Code	Small Entity Fee Code	Fee (\$)	Fee (\$)	Fee Description	Fee Paid
101	201	760	380	Utility filing fee	760.00
106	206	310	155	Design filing fee	
107	207	480	240	Plant filing fee	
108	208	760	380	Reissue filing fee	
114	214	150	75	Provisional filing fee	
SUBTOTAL (1) (\$)					760.00

2. CLAIMS

Total Claims	Extra	Fee from below	Fee Paid
1 - 20 =	X	18	0.00
Independent Claims 1 - 3 =	X	78	0.00
Multiple Dependent Claims	X	260	

Large Entity Fee Code	Small Entity Fee Code	Fee (\$)	Fee (\$)	Fee Description
103	203	18	9	Claims in excess of 20
102	202	78	39	Independent claims in excess of 3
104	204	260	130	Multiple dependent claim
109	209	78	39	Reissue independent claims over original patent
110	210	18	9	Reissue claims in excess of 20 and over original patent

SUBTOTAL (2) (\$)
0.00**FEE CALCULATION (continued)****3. ADDITIONAL FEES**

Large Entity Fee Code	Small Entity Fee Code	Fee (\$)	Fee (\$)	Fee Description	Fee Paid
105	205	130	65	Surcharge - late filing fee or oath	
127	227	50	25	Surcharge - late provisional filing fee or cover sheet	
139	139	130	130	Non-English specification	
147	147	2,520	2,520	For filing a request for reexamination	
112	112	920*	920*	Requesting publication of SIR prior to Examiner action	
113	113	1,840*	1,840*	Requesting publication of SIR after Examiner action	
115	215	110	55	Extension for reply within first month	
116	216	380	190	Extension for reply within second month	
117	217	870	435	Extension for reply within third month	
118	218	1,360	680	Extension for reply within fourth month	
128	228	1,850	925	Extension for reply within fifth month	
119	219	300	150	Notice of Appeal	
120	220	300	150	Filing a brief in support of an appeal	
121	221	260	130	Request for oral hearing	
138	138	1,510	1,510	Petition to institute a public use proceeding	
140	240	110	55	Petition to revive - unavoidable	
141	241	1,210	605	Petition to revive - unintentional	
142	242	1,210	605	Utility issue fee (or reissue)	
143	243	430	215	Design issue fee	
144	244	580	290	Plant issue fee	
122	122	130	130	Petitions to the Commissioner	
123	123	50	50	Petitions related to provisional applications	
126	126	240	240	Submission of Information Disclosure Stmt	
581	581	40	40	Recording each patent assignment per property (times number of properties)	
146	246	790	395	Filing a submission after final rejection (37 CFR 1.129(a))	
149	249	760	380	For each additional invention to be examined (37 CFR 1.129(b))	
Other fee (specify) 25 Request for Corrected Filing Receipt					
Other fee (specify)					
* Reduced by Basic Filing Fee Paid					
SUBTOTAL (3) (\$)					0.00

SUBMITTED BY

Typed or Printed Name	Kent R. Richardson	Reg. Number	39,443
Signature		Deposit Account	23-2415
Date	8/26/99	User ID	(16321-709)

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.